

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No.

146

Registered No.

41

1. PLACE OF BIRTH

County Gila State Arizona

District or Township _____ or Village _____

City Gouphur No. _____ St. _____ Ward _____2. Full name of child Robert William Ayersman Jr. (If birth occurred in a hospital or institution, give its NAME instead of street and number) (If child is not yet named, make supplemental report, as directed.)Sex of Child Male To be answered ONLY in event of plural births. 4. Twin, triplet or other _____ 5. No., in order of birth _____ 6. Legitimate? Yes Date of birth June 2, 1931 Month Day Year8. FATHER Full name Robert William Ayersman 14. MOTHER Full maiden name Viola Ellibord9. Residence (Usual place of abode) Gouphur 15. Residence (Usual place of abode) Gouphur
If non-resident, give place and state.10. Color or race White 11. Age at last birthday 22 (Years) 16. Color or race White 17. Age at last birthday 23 (Years)12. Birthplace (city or place) Colorado (State or country) 18. Birthplace (city or place) Duncan (State or country) Ark13. Occupation Sheet Metal Worker 19. Occupation House Wife
Nature of Industry Copper Mill Nature of Industry _____20. Number of children of this mother _____ (Taken as of time of birth of child herein certified and including this child.) (a) Born alive and now living 6 (b) Born alive but now dead 0 (c) Stillborn 0 21. Were precautions taken against ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was _____ (Born alive Stillborn) at _____ m. on the date above stated.Signature Charles H. Hurd (Physician or midwife)Given name added from a supplemental report. Address Hay and Arizona915-602-574 Month day year Filed 6-3 1931 Registrar W. D. Nash Registrar